

| POSITION                  | INITIALS           | ID NO.             | DATE           |
|---------------------------|--------------------|--------------------|----------------|
| FEE DETERMINATION         | <i>[Signature]</i> | <i>[Signature]</i> | <i>8-1-00</i>  |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> |                    | <i>8/4/00</i>  |
| FORMALITY REVIEW          |                    |                    |                |
| RESPONSE FORMALITY REVIEW | <i>[Signature]</i> | <i>5622</i>        | <i>9-28-00</i> |

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
" ..... Allowed      I ..... Interference  
- (Through numeral) ... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

| Claim | Final | Original | Date     |
|-------|-------|----------|----------|
| 1     | 1     | 1        | 10-28-02 |
| 2     | 2     | 2        | 3-11-03  |
| 3     | 3     | 3        | 7-24-03  |
| 4     | 4     | 4        | 1-18-03  |
| 5     | 5     | 5        | 5-4-03   |
| 6     | 6     | 6        |          |
| 7     | 7     | 7        |          |
| 8     | 8     | 8        |          |
| 9     | 9     | 9        |          |
| 10    | 10    | 10       |          |
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| Claim | Final | Original | Date |
|-------|-------|----------|------|
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| Claim | Final | Original | Date |
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If more than 150 claims or 10 actions  
staple additional sheet here

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